2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State
03-26-2003 90161 041 ****61.25

DOCUMENT # N95000005566

1. Entity Name
JACKSONVILLE CHURCH OF RELIGIOUS SCIENCE, INC.

Principal Place of Business	Mailing Address
~~PO BOX 600159~~ PO Box 848	~~PO BOX 600159~~ PO Box 848
~~JACKSONVILLE FL 32260~~ Ponte Vedra Bch	~~JACKSONVILLE FL 32260~~ 01 Ponte Vedra Bch, FL
FL 32004-0848	32004-0848

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
PO Box 848	PO Box 848
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ponte Vedra, FL	City & State: Ponte Vedra, FL
Zip: 32004-0848	Zip: 32004-0848
Country: USA	Country

4. FEI Number 59-3349041 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FAGEN, NANCY
ISLAND HOUSE CONDO
5650 A1A SOUTH #G235
ST AUGUSTINE FL ~~32085~~ 32080

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Nancy Fagen DATE March 25, 2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT MAY, NORMA JEAN 2941 BRIDLEWOOD LANE JACKSONVILLE FL 32257	☒ Delete	PASTOR, President NANCY FAGEN 5650 A1A SO, G-235 St Augustine, FL 32080	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT ZIEGLER, TED 5151 PIRATES COVE RD JACKSONVILLE FL 32210	☒ Delete	VPT SANDRA COOPER 1200 Celebration Ct. Jacksonville, FL 32259	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KNIGHT, CONSTANCE ~~1610 RAINCROW DR~~ ~~JACKSONVILLE FL 32259~~	☐ Delete	Knight, Constance, Treasurer 3217 FIDDLERS HAMMOCK LN PONTE VEDRA BCH, FL 32082	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Board Member MARY JO WARPOOL 602 Sturdivant Ave Atlantic Bch, FL 32233	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Secretary Cindy DeLassus 12916 Jupiter Hills Circle N. Jacksonville, FL 32225	☐ Change ☒ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Nancy Fagen 3-25-03 (904) 471-9024